

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. Mr. Daniel Kunhardt Jr.

Mailing Address 11 Madison Circle

City

Greenfield

State

MA

Zip Code

01301-2703

FEC ID number of contributing
federal political committee.

C

Name of Employer

New York Life Insurance Company

Occupation

Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

04 / 30 / 2015

Transaction ID : PR9712409

Amount of Each Receipt this Period

250.00

P/R Deduction (\$250.00 Monthly)

Full Name (Last, First, Middle Initial)

B. Mr. Paul A. Lewis

Mailing Address PO Box 581

City

Lockeford

State

CA

Zip Code

95237-0581

FEC ID number of contributing
federal political committee.

C

Name of Employer

New York Life Insurance Company

Occupation

Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.36

Date of Receipt

04 / 30 / 2015

Transaction ID : PR9712612409

Amount of Each Receipt this Period

83.34

P/R Deduction (\$83.34 Monthly)

Full Name (Last, First, Middle Initial)

C. Mr. Jerry H. Lorey

Mailing Address 10690 Goldsberry Road

City

Shreveport

State

LA

Zip Code

71106-8345

FEC ID number of contributing
federal political committee.

C

Name of Employer

New York Life Insurance Company

Occupation

Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

04 / 30 / 2015

Transaction ID : PR9740112409

Amount of Each Receipt this Period

250.00

P/R Deduction (\$250.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

583.34